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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. RYAN KROMHOLZ & MANION, S.C. POST OFFICE BOX 26618 MILWAUKEE, WI 53226 12/23/2005 HVUONG2 00000030 10780027 Linda _Wenzel (Depositor's name) 300.00 OP (Signature 700.00 DP 02 FC:2501 03 FC:8001 30.00 OP 20 (Date) December 2005 ATTORNEY DOCKET NO. CONFIRMATION NO. FIRST NAMED INVENTOR APPLICATION NO. FILING DATE 9222.17800-DIV 2 9263 10/780,027 02/17/2004 John H. Shadduck TITLE OF INVENTION: SURGICAL INSTRUMENTS AND TECHNIQUES FOR TREATING GASTRO-ESOPHAGEAL REFLUX DISEASE DATE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE YES \$700 \$300 \$1000 12/23/2005 nonprovisional EXAMINER ART UNIT CLASS-SUBCLASS FARAH, AHMED M 3739 606-041000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Ryan Kromholz & Manion, S.C. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🖵 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies XI The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _ 06-2360 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above)

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Daniel D. Ryan 29,243 Typed or printed name Registration No. This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).